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(user-modified/updated) PTO/SB/01 (12-97)

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION**

**(37 CFR 1.63)**

**(And Power of Attorney)**

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number ATO-002.00

First Named Inventor TOMBLER

**COMPLETE IF KNOWN**

Application Number 10/613,217

Filing Date July 3, 2003

Group Art Unit

Examiner Name

As a below-named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**APPARATUS AND METHOD FOR FABRICATION OF NANOSTRUCTURES USING DECOUPLED HEATING OF CONSTITUENTS**

the specification of which (Title of the Invention)

☐ is attached hereto  
OR

☒ was filed on (MM/DD/YYYY) 07/03/2003 as United States Application Number or PCT International

Application Number 10/613,217 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by: any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 35(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

(This section, now obsolete, has been whited out)

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual cases. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Attorney Docket Number: ATO-002.00

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## DECLARATION — Utility or Design Patent Application (And Power of Attorney)

(This section, now obsolete, has been whited out)

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar Code  
Label here

Name	Registration Number	Name	Registration Number
Chiahua George Yu	43,301		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:

☐ Customer Number  
or Bar Code Label

OR ☒ Correspondence address below

Name	Chiahua George Yu				
Address	Law Office of C. George Yu				
Address	1250 Oakmead Pky., Ste. 210				
City	Sunnyvale	State	CA	ZIP	94085
Country	U.S.A.	Telephone	(408) 739-4518	Fax	(408) 739-2300

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Thomas W., Jr.						
Family Name or Surname	TOMBLER						
Inventor's Signature					Date	3/7/04	
Residence: City	Santa Barbara	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address:	1035 Cliff Drive, Apt. 8						
Post Office Address:							
City	Santa Barbara	State	CA	ZIP	93109	Country	U.S.A.

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Attorney Docket Number: ATO-002.00



PTO/SB/02A (10-00)

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page <u>1</u> of <u>1</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name: Brian Y.		Family Name or Surname: LIM	
Inventor's Signature:		Date: 3/31/04	
Residence: City: Santa Barbara	State: CA	Country: U.S.A.	Citizenship: U.S.A.
Mailing Address: 2100 Cliff Drive			
Mailing Address:			
City: Santa Barbara	State: CA	ZIP: 93109	Country: U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name: Jon W.		Family Name or Surname: LAI	
Inventor's Signature:		Date: 3/30/04	
Residence: City: Santa Barbara	State: CA	Country: U.S.A.	Citizenship: U.S.A.
Mailing Address: 5090 Pocosco Way			
Mailing Address:			
City: Santa Barbara	State: CA	ZIP: 93111	Country: U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name:		Family Name or Surname:	
Inventor's Signature:		Date:	
Residence: City:	State:	Country:	Citizenship:
Mailing Address:			
Mailing Address:			
City:	State:	ZIP:	Country:

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